Department of State

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## COR AMND/RESTATE/CORRECT OR O/D RESIGN INTERFACE TECHNOLOGIES, INC.

| Certificate of Status | 0       |
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Help

## Articles of Amendment to Articles of Incorporation

|  | of                                      |                            |                                       |           |
|--|---|----------------------------|---------------------------------------|-----------|
| INTERFACE TECHNOLOGIES, INC.   |   |                            |                                       |           |
| (Name of Corporation as curr   | rently filed with the                   | Florida Dept. of State)    |                                       |           |
| P01000028497   |   |                            |                                       |           |
| (Document Numb   | ber of Corporation (i                   | (known)                    | · · · · · · · · · · · · · · · · · · · |           |
| Pursuant to the provisions of section 607.1006, Florida Statutes, its Articles of Incorporation:   | this Florida Profit (                   | Corporation adopts the fol | lowing amendmen                       | it(s) 10  |
| A. If amending name, enter the new name of the corporation   | <u>n:</u>                               |                            |                                       |           |
| name must be distinguishable and contain the word "corporation "Inc.," or Co.," or the designation "Corp.," "Inc.," or "Co "chartered," "professional association," or the abbreviation "I | ". A professional c                     |                            |                                       |           |
| B. Enter new principal office address, if applicable:  |   |                            |                                       |           |
| (Principal office address MUST BE A STREET ADDRESS )   | *************************************** |                            | 20                                    |           |
|  |   |                            | 7 <u>7</u>                            | recorded) |
|  |   |                            | <del></del>                           | 4226      |
| C. Enter new mailing address, if applicable:   |   |                            | 21                                    | 1         |
| (Mailing address MAY BE A POST OFFICE BOX)   |   |                            | SS B                                  |           |
|  |   |                            |                                       |           |
|  | <del></del>                             |                            | 7. P. 2                               |           |
|  |   |                            |                                       |           |
| D. If amending the registered agent and/or registered office<br>new registered agent and/or the new registered office add  |   | enter the name of the      |                                       |           |
| new registered agent and/or the new registered office add  | aress:                                  |                            |                                       |           |
| Name of New Registered Agent   | <del> </del>                            |                            | <del></del>                           |           |
| (Florid  | da street address)                      | <del></del> .              |                                       |           |
| New Registered Office Address:   |   | , Florida                  |                                       |           |
|  | tCity)                                  |                            | (Zip Code)                            |           |
|  |   |                            |                                       |           |
| New Registered Agent's Signature, if changing Registered A   | gent:                                   |                            |                                       |           |

Thereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Example:

## If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

| X Change                      | P1 John                | i Dog          |  |
|-------------------------------|------------------------|----------------|--|
| X Remove                      | <u>V</u> <u>Mik</u>    | e Jones        |  |
| X Add                         | <u>SV</u> <u>Sally</u> | y Smith        | <b>20</b>                                |
| Type of Action<br>(Check One) | <u>Title</u>           | <u>Name</u>    | Address Address                          |
| 1) X Change                   | CEO                    | BRIAN P HELMKE | 3333 S. CONGRESS AVE                     |
| Add                           |                        |                | SUITE 200                                |
| Remove                        |                        |                | DELRAY BEACH, FL 33445                   |
| 2) X Change                   | President              | CHAD ZAKIN     | 3333 S. CONGRESS AVE                     |
| Add                           |                        |                | SUITE 200                                |
| Remove 3 ) Change             |                        |                | DELRAY BEACH, FL 33445                   |
| Add                           |                        |                |  |
| Remove                        |                        |                |  |
| 4) Change                     |                        |                |  |
| Add                           |                        |                |  |
| Remove                        |                        |                | 11-1481-1481-1-1-1-1-1-1-1-1-1-1-1-1-1-1 |
| 5) Change                     |                        |                |  |
| Add                           |                        |                |  |
| Remove                        |                        |                |  |
| 6) Change                     |                        |                |  |
| Add                           |                        |                |  |
| Remove                        |                        |                |  |

| f amending or adding add<br>Attach additional sheets, if i | necessary). (Be spec   | ific)                                   |                                       |   |                |              |
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|  |                        |   |                                       |   |                |              |
| f an amendment provides<br>provisions for implementi       | for an exchange, recla | issification, or ca                     | ncellation of issue                   | d shares,                               |                |              |
| (if not applicable, indic                                  | ag the amendment in a  | not contained in                        | me amenument ic                       | <u>seir:</u>                            |                |              |
|  | ,                      |   |                                       |   |                |              |
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| O 02/21/2024 | 8:07 AM |
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| The date of each amendment(s) addate this document was signed.               | option:   | _, if other than the |
|--|---|----------------------|
| Effective date if applicable:  |   |                      |
|  | (no more than 90 days ofter amendment file date)  |                      |
| Note: If the date inserted in this bl<br>document's effective date on the De | ock does not meet the applicable statutory filing requirements, this date will repartment of State's records.   | not be listed as the |
| Adoption of Amendment(s)   | ( <u>CHECK ONE</u> )  |                      |
| The amendment(s) was/were ado action was not required.                       | pted by the incorporators, or board of directors without shareholder action and s $ \begin{array}{c}                                     $  | · 26                 |
| ☐ The amendment(s) was/were ado<br>by the shareholders was/were suf          | pited by the shareholders. The number of votes east for the amendment(s) fricient for approval.   | 2024 FEB 21          |
|  | roved by the shareholders through voting groups. The following statement of cach voting group entitled to vote separately on the amendment(s):                                      |                      |
|  | or the amendment(s) was/were sufficient for approval  | 9:27                 |
|  | (voting group)  |                      |
| 2/21/2024<br>Dated   |   |                      |
| Signature /s/Ac  | lia Myles   |                      |
| (By a dir<br>selected  | ector, president or other officer – if directors or officers have not been by an incorporator – if in the hands of a receiver, trustee, or other court diduciary by that fiduciary) | •                    |
| 1  | Adia Myles  |                      |
| -  | (Typed or printed name of person signing)   |                      |
| ,  | Attorney-in-Fact  |                      |